BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

KELL-0064

		CLAIMS AS	G FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			//				ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		· 0			X\$ 9=		OR	X\$18=	0.00
INDEPENDENT CLAIMS			4 minus 3 =		' /			X40=		OR	X80=	80-00
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less th				than zero, enter "0" in colum			L	TOTAL		OR	TOTAL	790.0
CLAIMS AS AMENDED - PART II								. 1		•	OTHER	
(Column 1)			(Colun					SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A194	-		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		i [+135=		OR	+270=	
					•		L	TOTAL		OR	TOTAL	
		(Column 1)		(Colu	ımn 2)	(Column 3)	,	ADDIT. FEE		,	ADDIT. FEE	
		CLAIMS		HIGI	HEST		1		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	_	=		X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=] [X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] [
								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	imn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	╽┃	X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		<u> </u>	╽╽	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDEN				IT CLAIM		J ∤			1	·	+
	If the entry in eat-	imp 1 is less than	the entry is sel	ume 2 wei	ita "N" in ~	alumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	imber Previously Pa nber Previously Pa	aid For" (Total o	or Indepen	dent) is the	an 3, enter 3. e highest numb	er fou	and in the ap	propriate bo	x in c	olumn 1.	